## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000119047

1. Entity Name

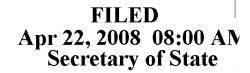
EDUCATIONAL CONSULTANTS OF NORTH FL, INC.



Principal Place of Business

3121 SHARER ROAD TALLAHASSEE, FL 32312 Mailing Address

3121 SHARER ROAD TALLAHASSEE, FL 32312





DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 04132008 No Chg-P

4. FEI Number 20-5548649

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, WILLIE E 3121 SHARER ROAD TALLAHASSEE, FL 32312 DO NOT WRITE IN THIS SPACE

<ol> <li>The above named entity submits this statement for the the obligations of registered agent.</li> </ol>	purpose of changing its registered office	ce or registered agent, or bo	ith, in the State of Florida. I am familía	with, and accept
SignATURE	e if applicable (NOTE: Registered Agent	signature required when reinstating)	DATE	
EILE NOWILL EEE 18 \$150 00	9. Election Campaign Financing	\$5.00 May Be	#0000001000	

After May 1, 2008 Fee will be \$550.00

Trust Fund Contribution.

Added to Fees

OFFICERS AND DIRECTORS 10. PS JOHNSON, WILLIE E NAME 3121 SHARER ROAD STREET ADDRESS CITY ST-ZIP TALLAHASSEE, FL 32312 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #